

Overview of Recommended Measures (draft as of 10/31/14) – 15 Acute Care Measures Highlighted in Yellow, for Review 12/2/14

RECOMMENDED MEASURES – POPULATION Prevalence within the Population Results for State, Counties/Accountable Communities of Health <i>(Note: Many, but not all, measures shown to the right will also have results at the state and/or county levels).</i>
1. Immunization: Influenza 2. Unintended Pregnancies 3. Tobacco: % of Adults who Smoke Cigarettes 4. Behavioral Health: % of Adults Reporting 14 or more Days of Poor Mental Health 5. Ambulatory Care Sensitive Hospitalizations for COPD

RECOMMENDED MEASURES – HEALTH CARE COSTS
51. Annual State-purchased Health Care Spending Relative to State’s GDP 52. Medicaid Spending per Enrollee 53. Public Employee and Dependent Spending per Enrollee (Include Public Schools)

RECOMMENDED MEASURES – CLINICAL SETTINGS Clinical Processes or Outcomes Results for Health Plans, Medical Groups and/or Hospitals		
Health Plan (Only)	Medical Groups (4 or more Providers)	Hospitals
<u>Children/Adolescents</u> 6. Access to Primary Care 7. Well-Child Visits in the 3 <sup>rd</sup> , 4 <sup>th</sup> , 5 <sup>th</sup> and 6 <sup>th</sup> Years of Life 8. Youth Obesity: BMI Assessment/Counseling 9. Oral Health: Primary Caries Prevention/ Intervention	<u>Children/Adolescents</u> 19. Immunization: Childhood Status 20. Immunizations: Adolescent Status 21. Immunizations: HPV Vaccine for Adolescents 22. Appropriate Testing for Children with Pharyngitis	41. Patient Experience: Communication about Medications and Discharge Instructions 42. 30-day All Cause Readmissions* 43. Potentially Avoidable ED Visits* 44. Patients w/ 5 or More ED Visits without Care Guidelines 45. C-Section NTSV 46. 30-day Mortality: Heart Attack 47. Catheter-associated Urinary Tract Infection 48. Stroke: Thrombolytic Therapy 49. Falls with Injury per Patient Day 50. Complications/Patient Safety Composite (11 components)
<u>Adults</u> 10. Access to Primary Care 11. Adult Obesity: BMI Assessment/Counseling 12. Medical Assistance with Smoking and Tobacco Use Cessation 13. Colorectal Cancer Screening* 14. Diabetes Care: Blood Pressure Control 15. Diabetes Care: HbA1c Poor Control 16. Hypertension: Blood Pressure Control 17. Follow-up After Hospitalization for Mental Illness @ 7 days, 30 days 18. 30-day Psychiatric Inpatient Readmission  <i>*Results available for medical groups starting in 2016.</i>	<u>Adults</u> 23. Patient Experience: Provider Communication 24. Screening: Cervical Cancer 25. Screening: Chlamydia 26. Screening: Breast Cancer 27. Screening: HIV 28. Immunizations: Pneumonia (Older Adults) 29. Avoidance of Antibiotics for Acute Bronchitis 30. Avoidance of Imaging for Low Back Pain 31. Asthma: Use of Appropriate Medications 32. Cardiovascular Disease: Use of Statins 33. COPD: Use of Spirometry in Diagnosis 34. Diabetes: HbA1c Testing 35. Diabetes: Eye Exams 36. Diabetes: Screening for Nephropathy 37. Depression: Medication Management 38. Medication Adherence: Proportion of Days Covered 39. Medication Safety: Annual Monitoring for Patients on Persistent Medications 40. Medications: Rate of Generic Prescribing	<i>*Results also available for medical groups.</i>

**RECOMMENDATIONS: “STARTER SET” OF MEASURES – 15 Acute Care Measures for Review, 12/02/14**

	Measure	WG	Steward	NQF #	Type of Data	Data Source	Confidence Level	Recommended Unit(s) of Analysis					Stratify
								State-wide	County or ACH	Health Plan	Medical Group	Hospital	
17.	Follow-Up After Hospitalization for Mental Illness @ 7 days, 30 days	Acute	NCQA	0576	Claims	TBD <sup>1</sup>	TBD <sup>1</sup>	Maybe	Maybe	X			C, MC
18.	30-day Psychiatric Inpatient Readmission	Acute	Washington State (Homegrown)	NA	Claims	TBD <sup>1</sup>	TBD <sup>1</sup>	Maybe	Maybe	X			
22.	Appropriate Testing for Children with Pharyngitis	Acute	NCQA	0002	Claims	Alliance	High	X	X	X	X		C/MC, MC R/E
29.	Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis	Acute	NCQA	0058	Claims	Alliance	High	X	X	X	X		C/MC, MC R/E
30.	Avoidance of Imaging for Low Back Pain	Acute	NCQA	0052	Claims	Alliance	High	X	X	X	X		C/MC, MC R/E
41	Patient Experience (Inpatient) <ul style="list-style-type: none"><li>• Communication about Medicines</li><li>• Discharge Information</li></ul>	Acute	CMS	0166	HCAHPS Survey	WSHA/ Hospital Compare	High	X				X	
42.	30-Day All-Cause Hospital Readmissions	Acute	NCQA	1768	Claims	Alliance	Medium	X	X	X	X	X	C/MC
43.	Potentially Avoidable ED visits	Acute	Medi-Cal	NA	Claims	Alliance	High	X	X		X	X	C/MC
44.	Percent of Patients with 5 or More Visits to the Emergency Room <i>without</i> a Care Guideline	Acute	NA	NA	Clinical	WWSA/EDIE	High	X				X	
45.	Cesarean Section - NTSV C-Section	Acute	Joint Commission	0471	Claims and Clinical Data	WSHA	Medium	X				X	
46.	30-day Mortality: Heart Attack(AMI)	Acute	CMS	0230	Claims and Clinical	WSHA/ Hospital Compare	High	X				X	
47.	Catheter-Associated UTI	Acute	CDC	0138	Clinical	WSHA	High	X				X	
48.	Stroke: Thrombolytic Therapy	Acute	Joint Commission	437	Clinical Data	WSHA	High	X				X	
49.	Falls with Injury Per Patient Day (adult acute care only)	Acute	WA DOH/ American Nurses Association	0202	WWSA	WSHA	High	X				X	
50.	Complications/Patient Safety for Eleven Selected Indicators (Composite)	Acute	AHRQ	0531	Claims	WSHA/ Hospital Compare	High	X				X	

<sup>1</sup> The Washington Health Alliance currently does not have access to claims information related to behavioral health. More work is needed to determine whether the data source for these measures will be the Alliance or the Health Plans directly.

Summary - Measure Definitions

Measure	Summary of Measure Definition
Follow-Up After Hospitalization for Mental Illness (FUH)	Percentage of discharges for members 6 years of age and older who were hospitalized for treatment of selected mental health disorders and who had an OP visit, an intensive OP encounter, or partial hospitalization with a mental health practitioner. Two rates are reported: 1) the percentage of members who received follow-up within 30 days of discharge, 2) the percent of members who received follow-up within 7 days of discharge
Psychiatric Inpatient Readmissions	For members 18 years of age and older, the number of acute inpatient psychiatric stays during the measurement year that were followed by an acute readmission for a psychiatric diagnosis within 30 days
Appropriate Testing for Children with Pharyngitis (CWP)	Percentage of children ages 2 to 18 that were diagnosed with pharyngitis, dispensed an antibiotic, and received a group A streptococcus test for the episode
Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis (AAB)	The percentage of adults 18–64 years of age with a diagnosis of acute bronchitis who were not dispensed an antibiotic prescription.
Avoidance of Imaging Studies for Low Back Pain	This measure calculates the percentage of patients 18-50 years with a diagnosis of lower back pain who did not have an imaging study (plain x-ray, MRI, CT scan) within 28 days of diagnosis.
HCAHPs <ul style="list-style-type: none"><li>Medicines Explained</li><li>Discharge Information</li></ul>	27-items survey instrument with 7 domain-level composites. Work group selected two in particular (Communication about Medicines and Discharge Information) as they relate specifically to improving care transitions and reducing hospital readmissions.
30-day All-Cause Hospital Readmission	For patients 18 years of age and older, the number of acute inpatient stays during the measurement year that were followed by an acute readmission for any diagnosis within 30 days and the predicted probability of an acute readmission. Data are reported in the following categories: 1. Count of Index Hospital Stays (denominator) - Observed 2. Count of 30-day readmissions (numerator) - Observed 3. Average Risk Adjusted Probability of Readmission - Expected
Potentially Avoidable ED visits	Avoidable emergency visits using the Medi-Cal Diagnosis list to identify potentially avoidable ED visits; considered very conservative measure.
Percent of Patients with Five or More Visits to the Emergency Room without a Care Guideline	Percent of patients with 5 or more visits to the Emergency Room without a Care Guideline; data comes from EDIE.
PC-02: Cesarean Section - NTSV C-Section [Nulliparous (first baby), Term (>37 weeks), Singleton (one baby), and (head down)]	This measure assesses the number of nulliparous women with a term, singleton baby in a vertex position delivered by cesarean section. This measure is a part of a set of five nationally implemented measures that address perinatal care
30-Day Heart Attack Mortality	The measure estimates a hospital 30-day risk-standardized mortality rate (RSMR), defined as death for any cause within 30 days after the date of admission of the index admission, for patients 18 and older discharged from the hospital with a principal diagnosis of acute myocardial infarction (AMI). CMS annually reports the measure for patients who are 65 years or older and are either enrolled in fee-for-service (FFS) Medicare and hospitalized in non-federal hospitals or are hospitalized in Veterans Health Administration (VA) facilities.
Catheter-Associated Urinary Tract Infection	Standardized Infection Ratio (SIR) of healthcare-associated, catheter-associated urinary tract infections (CAUTI) will be calculated among patients in the following patient care locations: <ul style="list-style-type: none"><li>Intensive Care Units (ICUs) (excluding patients in neonatal ICUs [NICUs: Level II/III and Level III nurseries])</li><li>Specialty Care Areas (SCAs) - adult and pediatric: long term acute care, bone marrow transplant, acute dialysis, hematology/oncology, and solid organ transplant locations</li><li>Other inpatient locations (excluding Level I and Level II nurseries).</li></ul> Only locations where patients reside overnight are included.

Measure	Summary of Measure Definition
STK-4: Thrombolytic Therapy	This measure captures the proportion of acute ischemic stroke patients who arrive at this hospital within 2 hours of time last known well for whom IV t-PA was initiated at this hospital within 3 hours of time last known well. This measure is a part of a set of eight nationally implemented measures that address stroke care that are used in The Joint Commission’s hospital accreditation and Disease-Specific Care certification programs.
Falls with Injury Per Patient Day (adult acute care and rehabilitation only)	Falls with Injury per patient day (adult acute care only) – Need to agree upon specific numerator/denominator specs; more than one measure available
PSI-90: Complications/Patient Safety for Selected Indicators (Composite)	<p>A composite measure of 11 potentially preventable adverse events for selected indicators. The weighted average of the observed-to-expected ratios for the following component indicators are included (but not reported separately):</p> <ul style="list-style-type: none"><li>• PSI #3 Pressure Ulcer Rate</li><li>• PSI #6 Iatrogenic Pneumothorax Rate</li><li>• PSI #7 Central Venous Catheter-Related Blood Stream Infection Rate</li><li>• PSI #8 Postoperative Hip Fracture Rate</li><li>• PSI #9 Perioperative Hemorrhage or Hematoma Rate</li><li>• PSI #10 Postoperative Physiologic and Metabolic Derangement Rate</li><li>• PSI #11 Postoperative Respiratory Failure Rate</li><li>• PSI #12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate</li><li>• PSI #13 Postoperative Sepsis Rate</li><li>• PSI #14 Postoperative Wound Dehiscence Rate</li><li>• PSI #15 Accidental Puncture or Laceration Rate</li></ul>